2018-2019 Catalog

Req. Emergency Medicine-Jacksonville

EMD R 1J | 4th Year Required | Emergency Medicine | Clinical Science

Prerequisites

MS3 clinical curriculum (at least Internal Medicine and Surgery)

Course Description

COURSE GOALS:
At the end of a 4-week rotation, a 4th year medical student should be able to do the following:
1. Demonstrate the Emergency Medicine "ABC's" approach in the evaluation of emergency patients.
2. Perform an initial evaluation of the undifferentiated Emergency Medicine patient, with focus on stabilization of acutely ill patients, and function as a member of Emergency Department team.
3. Be able to perform an evaluation of the trauma patient with initial primary survey, addressing life-threatening problems first, followed by the secondary survey.
4. Participate in prehospital care and be able to describe the structure, function and limitations of the EMS system.
5. Be able to manage patients with toxic exposures in general, and be able to recognize and treat common overdoses from reading and lecture assignments.
6. Be able to evaluate and treat common environmental illnesses.
7. Work to sharpen procedure skills by performing IV catheter insertion, urinary catheter insertion, suturing, and other necessary invasive procedures.
8. Recognize the limitations of Emergency Department, establishing appropriate consult and referral skills.

Course Faculty and Staff

- Thomas K Morrissey MD, PhD (Director)
- Debra Eurom (Course Staff)
- Dani Brown (Course Staff)

Meeting Place and Time

Orientation: first Monday of the rotation.
Jacksonville - 8:30 am in the conference room of the Emergency Medicine Administrative offices; 1st floor; Clinical Center. Time and place subject to change. Students will be notified by email ahead of time.

Course Materials
Classes Offered

<table>
<thead>
<tr>
<th>Period</th>
<th>Length</th>
<th>Credits</th>
<th>(Avail / Max) Slots</th>
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</thead>
<tbody>
<tr>
<td>Period 5</td>
<td>4 Weeks (Aug 26 - Sep 22)</td>
<td>4</td>
<td>(3 / 3)</td>
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<tr>
<td>Period 6</td>
<td>4 Weeks (Sep 23 - Oct 20)</td>
<td>4</td>
<td>(5 / 5)</td>
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<tr>
<td>Period 7</td>
<td>4 Weeks (Oct 21 - Nov 17)</td>
<td>4</td>
<td>(10 / 10)</td>
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<tr>
<td>Period 8</td>
<td>4 Weeks (Nov 18 - Dec 15)</td>
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<td>(10 / 10)</td>
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<tr>
<td>Period 9</td>
<td>4 Weeks (Jan 1 - Jan 26)</td>
<td>4</td>
<td>(10 / 10)</td>
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<tr>
<td>Period 10</td>
<td>4 Weeks (Jan 27 - Feb 23)</td>
<td>4</td>
<td>(11 / 11)</td>
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<tr>
<td>Period 11</td>
<td>4 Weeks (Feb 24 - Mar 23)</td>
<td>4</td>
<td>(11 / 11)</td>
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<tr>
<td>Period 12</td>
<td>4 Weeks (Mar 24 - Apr 20)</td>
<td>4</td>
<td>(11 / 11)</td>
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Evaluated Competencies

#1 Professionalism

**Educational Objectives:** Interact with patients, staff, colleagues, and supervisors in a professional manner. Demonstrate respect and maintenance of patient confidentiality. Manage conflicts while maintaining a professional demeanor.

**Method of Evaluation:** Based on direct clinical observation, students will receive daily written evaluations of their performance by attendings or senior residents. This will provide daily (formative) feedback and allow the identification (and remediation) of weakness. Final summative evaluations will be based on daily evaluation sheets,
performance in small group conferences, simulated patient encounters and the final examination. Completion of final examination will contribute to the final grade.

#2 Patient Care

**Educational Objectives:** Gather directed (appropriately complete) H&P information based on chief complaint. Generate case presentations, including risk stratified differentials and diagnostic/treatment plans governed by the premise of "ruling our worst case scenarios". Interpret lab and radiology data. Perform procedures as needed.

**Method of Evaluation:** Direct Clinical Observation, with daily feedback forms. Written test.

#3 Medical Knowledge

**Educational Objectives:** Demonstrate an appropriate fund of knowledge about patient disease processes; including physical and historical findings; appropriate diagnostic testing; appropriate stabilization and treatment skills; and patient disposition.

**Method of Evaluation:** Direct Clinical Observation and daily shift evaluations to provide timely feedback. Written Examination

#4 Practice-Based Learning

**Educational Objectives:** Develop skills at acquiring new clinically-relevant information and applying it to patient care. Examples include using on-line resources to answer clinical questions in real time. Apply information gained on rounds and from previous clinical encounters to new patients.

**Method of Evaluation:** Direct Clinical Observation. Student Participation in case presentation conferences.

#5 Interpersonal and Communication Skills

**Educational Objectives:** Develop skills to effectively communicate with patients, colleagues, coworkers, and supervisors. Students will present brief case presentations at change-of-shift rounds. Students will present cases to the clerkship directors in a workshop at the midpoint of the rotation. This will help aid in improving information transfer, and help improve patient safety. Students participate in a small group case presentation workshop to enhance transfer-of-care communication skills, which results in increased patient safety.

**Method of Evaluation:** Direct Clinical Observation. Case presentation workshop/conferences.

#6 Systems-Based Practice

**Educational Objectives:** Students will partner with the healthcare team to assure complete care of their patients. Examples include recognizing indications for
admission or discharge, assuring follow-up for discharged patients, consulting appropriate services for admitted patients. Appropriate cost-effective utilization of diagnostic testing will be emphasized.

**Method of Evaluation:** Based on direct clinical observation, students will receive daily written evaluations of their performance by attendings or senior residents. This will provide daily (formative) feedback and allow the identification (and remediation) of weakness. Final summative evaluations will be based on daily evaluation sheets, performance in small group conferences, simulated patient encounters and the final examination.